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Bib Data Sheet

CONFIRMATION NO. 4892

SERIAL NUMBER 10/660,443	FILING DATE 09/11/2003 RULE	CLASS 434	GROUP ART UNIT 3715	ATTORNEY DOCKET NO. P51374
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APPLICANTS

Michael A. Covington, Athens, GA;

** CONTINUING DATA *****

This appln claims benefit of 60/410,237 09/12/2002 *cf*

** FOREIGN APPLICATIONS *****

None

IF REQUIRED, FOREIGN FILING LICENSE GRANTED

** 12/04/2003

Foreign Priority claimed 35 USC 119 (a-d) conditions met	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance	STATE OR COUNTRY GA	SHEETS DRAWING 2	TOTAL CLAIMS 8	INDEPENDENT CLAIMS 2
Verified and Acknowledged	Examiner's Signature <i>[Signature]</i> Initials <i>cf</i>				

ADDRESS

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TITLE

Computer-implementable vocabulary-based test for a class of language disorder

FILING FEE RECEIVED 750	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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